



5-4-05

IFW\$

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

|   |                      |                        |              |
|---|----------------------|------------------------|--------------|
| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number   | 10/622,310             |              |
|   | Filing Date          | July 17, 2003          |              |
|   | First Named Inventor | Janice NORTH           |              |
|   | Art Unit             | 1614                   |              |
|   | Examiner Name        | R. Henley              |              |
| Total Number of Pages in This Submission  | 11                   | Attorney Docket Number | 273012013101 |

| ENCLOSURES (Check all that apply)   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form (1 page + duplicate for fee processing)<br><input type="checkbox"/> Fee Attached   | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Return Receipt Postcard |
| <input checked="" type="checkbox"/> Amendment/Reply (7 pages)<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)   |  |  |
| <input checked="" type="checkbox"/> Extension of Time Request (1 page)<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 |  |  |
| <b>Remarks</b><br>Customer No. 25225  |  |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                         |                 |
|--|-------------------------|-----------------|
| Firm Name                                  | MORRISON & FOERSTER LLP |                 |
| Signature                                  |                         |                 |
| Printed name                               | Karen R. Zachow, Ph.D.  |                 |
| Date                                       | May 3, 2005             | Reg. No. 46,332 |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 441683906 US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: May 3, 2005

Signature: (Grace Yu)



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

|   |  |                          |                 |
|---|--|--------------------------|-----------------|
| <b>Effective on 12/08/2004.</b><br><b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> |  | <b>Complete if Known</b> |                 |
| <b>FEE TRANSMITTAL</b><br><b>For FY 2005</b>  |  | Application Number       | 10/622,310      |
|   |  | Filing Date              | July 17, 2003   |
|   |  | First Named Inventor     | Janice NORTH    |
|   |  | Examiner Name            | R. Henley       |
|   |  | Art Unit                 | 1614            |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27                                    |  | Attorney Docket No.      | 273012013101    |
| <b>TOTAL AMOUNT OF PAYMENT</b>  |  | <b>(\$)</b>              | <b>1,020.00</b> |

|   |   |
|---|---|
| <b>METHOD OF PAYMENT</b> (check all that apply)   |   |
| <input type="checkbox"/> Check  | <input type="checkbox"/> Credit Card  |
| <input type="checkbox"/> Money Order  | <input type="checkbox"/> None   |
| <input type="checkbox"/> Other (please identify): _____   |   |
| <input checked="" type="checkbox"/> Deposit Account   | Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u> |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                |   |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below   | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee               |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                                     |

|   |                     |   |                    |                      |                                  |                       |                       |
|---|---------------------|---|--------------------|----------------------|----------------------------------|-----------------------|-----------------------|
| <b>FEE CALCULATION</b>  |                     |   |                    |                      |                                  |                       |                       |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                     |   |                    |                      |                                  |                       |                       |
|   | <b>FILING FEES</b>  |   | <b>SEARCH FEES</b> |                      | <b>EXAMINATION FEES</b>          |                       |                       |
|   |                     | <u>Small Entity</u>                                     |                    | <u>Small Entity</u>  |                                  | <u>Small Entity</u>   |                       |
| <b>Application Type</b>   | <b>Fee (\$)</b>     | <b>Fee (\$)</b>   | <b>Fee (\$)</b>    | <b>Fee (\$)</b>      | <b>Fee (\$)</b>                  | <b>Fee (\$)</b>       | <b>Fees Paid (\$)</b> |
| Utility   | 300                 | 150   | 500                | 250                  | 200                              | 100                   | 0.00                  |
| Design  | 200                 | 100   | 100                | 50                   | 130                              | 65                    | 0.00                  |
| Plant   | 200                 | 100   | 300                | 150                  | 160                              | 80                    | 0.00                  |
| Reissue   | 300                 | 150   | 500                | 250                  | 600                              | 300                   | 0.00                  |
| Provisional   | 200                 | 100   | 0                  | 0                    | 0                                | 0                     | 0.00                  |
| <b>2. EXCESS CLAIM FEES</b>   |                     |   |                    |                      |                                  |                       |                       |
|   |                     |   |                    |                      |                                  | <u>Small Entity</u>   |                       |
| <b>Fee Description</b>  |                     |   |                    |                      |                                  | <b>Fee (\$)</b>       | <b>Fee (\$)</b>       |
| Each claim over 20 (including Reissues)   |                     |   |                    |                      |                                  | 50                    | 25                    |
| Each independent claim over 3 (including Reissues)  |                     |   |                    |                      |                                  | 200                   | 100                   |
| Multiple dependent claims   |                     |   |                    |                      |                                  | 360                   | 180                   |
| <u>Total Claims</u>   |                     | <u>Extra Claims</u>                                     | <u>Fee (\$)</u>    | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> |                       |                       |
| 23  |                     | - 23 = 0  | x 50.00 =          | 0.00                 | <u>Fee (\$)</u>                  |                       | <u>Fee Paid (\$)</u>  |
|   |                     |   |                    |                      | 360.00                           |                       | 0.00                  |
| <u>Indep. Claims</u>  |                     | <u>Extra Claims</u>                                     | <u>Fee (\$)</u>    | <u>Fee Paid (\$)</u> |                                  |                       |                       |
| 2   |                     | - 3 = 0   | x 200.00 =         | 0.00                 |                                  |                       |                       |
| <b>3. APPLICATION SIZE FEE</b>  |                     |   |                    |                      |                                  |                       |                       |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |   |                    |                      |                                  |                       |                       |
| <u>Total Sheets</u>   | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> |                    | <u>Fee (\$)</u>      | <u>Fee Paid (\$)</u>             |                       |                       |
|   | - 100 =             | /50 (round up to a whole number) x                      |                    | 250.00 =             | 0.00                             |                       |                       |
| <b>4. OTHER FEE(S)</b>  |                     |   |                    |                      |                                  |                       |                       |
|   |                     |   |                    |                      |                                  | <u>Fees Paid (\$)</u> |                       |
| Non-English Specification, \$130 fee (no small entity discount)   |                     |   |                    |                      |                                  | 0.00                  |                       |
| Other (e.g., late filing surcharge): 1253 Extension for response within third month   |                     |   |                    |                      |                                  | 1,020.00              |                       |

|                     |                        |                                   |                |
|---------------------|------------------------|-----------------------------------|----------------|
| <b>SUBMITTED BY</b> |                        |                                   |                |
| Signature           | <u>Karen R. Zachow</u> | Registration No. (Attorney/Agent) | 46,332         |
| Name (Print/Type)   | Karen R. Zachow, Ph.D. | Telephone                         | (858) 720-5191 |
|                     |                        | Date                              | May 3, 2005    |